

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Bernie Moreno for Ohio**

**A.** Full Name (Last, First, Middle Initial)  
**SCHOTTENSTEIN, NICOLE, , ,**

Mailing Address 4300 EAST 5TH AVENUE

City COLUMBUS	State OH	Zip Code 43219-1816
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FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS
--	--

Receipt For: 2022  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
5800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 16 / 2021

Transaction ID : SA11A.3245

Amount of Each Receipt this Period

5800.00

☒ Memo Item  
CONTRIBUTION

REATTRIBUTION FROM SPOUSE; SEE  
REDESIGNATION

**B.** Full Name (Last, First, Middle Initial)  
**SCHOTTENSTEIN, NICOLE, , ,**

Mailing Address 4300 EAST 5TH AVENUE

City COLUMBUS	State OH	Zip Code 43219-1816
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FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS
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Receipt For: 2022  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
5800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 16 / 2021

Transaction ID : SA11A.3249

Amount of Each Receipt this Period

- 2900.00

☒ Memo Item  
CONTRIBUTION

REDESIGNATION TO GENERAL

**C.** Full Name (Last, First, Middle Initial)  
**SCHRAND, GREG, , ,**

Mailing Address 904 CAITLIN DRIVE

City UNION	State KY	Zip Code 41091-8009
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FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS
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Receipt For: 2022  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 07 / 2021

Transaction ID : SA11A.3398

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶